

# QEEG Clinical Report

EEGLens



The QEEG report is provided by NPCindex Institute, operating under the QEEGhome brand.

## Personal Data:

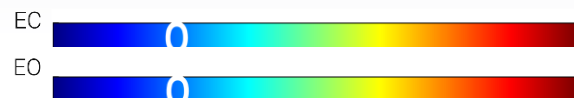
Name: Test Test  
Gender: Female  
Age: 1992-06-27 - 33.5  
Handedness: Right

## Clinical Data:

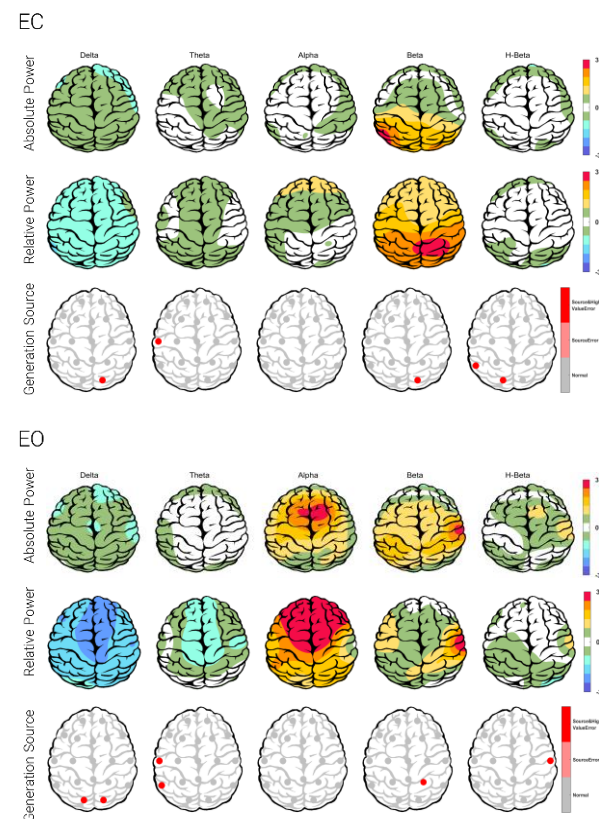
Initial diagnosis: BMD  
Medication: -  
Date of Recording: 2025-10-27  
Source of Referral: Dr Test

This case belongs to Dr Test

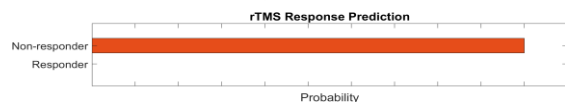
## EEG Quality



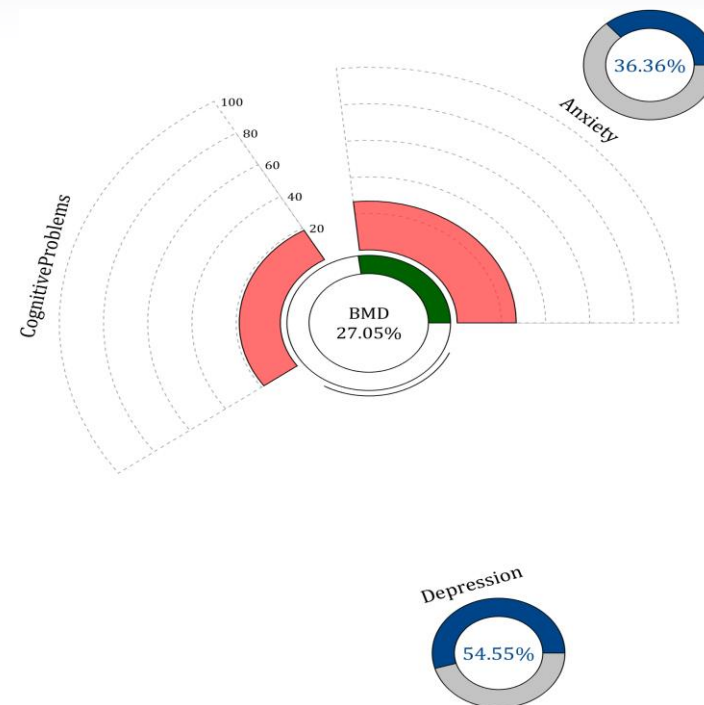
## Z-score Information



## TMS Responsibility



## Pathological Assessment



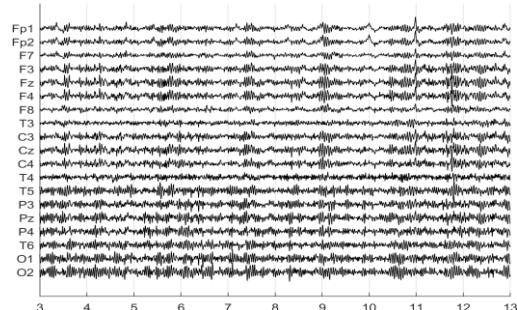
## EEG Neuromarker Values

| Neuromarker        | Region    | Value | Assessment |
|--------------------|-----------|-------|------------|
| APF - EO           | Frontal   | 10.33 | High       |
| APF - EC           | Frontal   | 11.25 | High       |
| APF - EO           | Occipital | 10.62 | Normal     |
| APF - EC           | Occipital | 11.62 | High       |
| Arousal Level - EO | -         | -     | Normal     |
| Arousal Level - EC | -         | -     | High       |

## Denoising Information

Eye Close

Raw EEG



Rejected Channel



**Total Recording Time Remaining:**

241.66 sec

**Number of Eye and Muscle Elements**

Eye: 2

Muscle: 1

Low Artifact Percentage



High Artifact Percentage

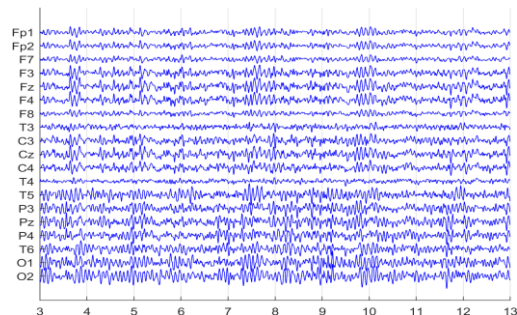


Total Artifact Percentage



**EEG Quality:** perfect

Denoised EEG

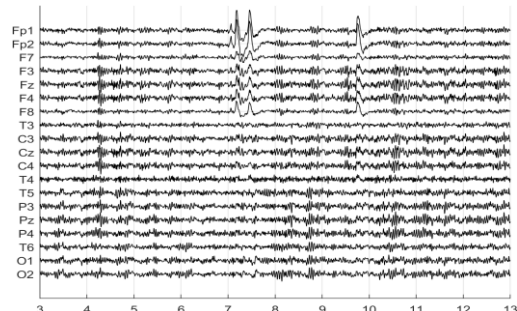


Flat Channel



Eye Open

Raw EEG



Rejected Channel



**Total Recording Time Remaining:**

241.93 sec

**Number of Eye and Muscle Elements**

Eye: 2

Muscle: 0

Low Artifact Percentage



High Artifact Percentage

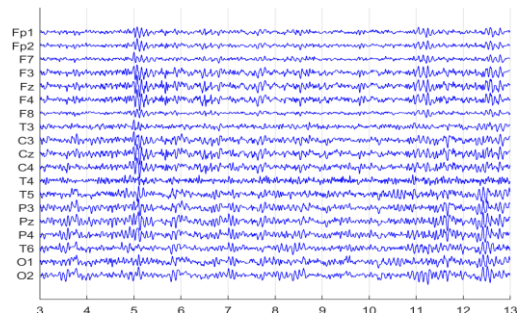


Total Artifact Percentage



**EEG Quality:** perfect

Denoised EEG

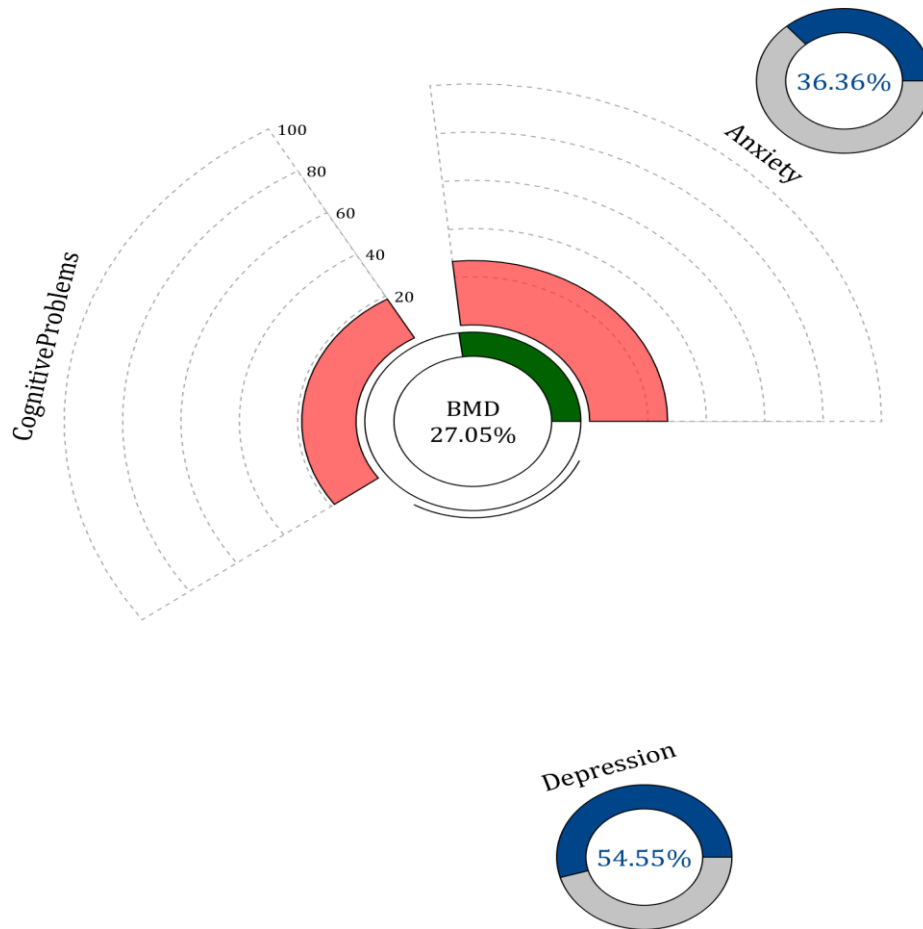


Flat Channel



## Pathological Assessment

Main Diagnosis: Bipolar Mood Disorder



### Description

According to the guidelines, the initial diagnosis of BMD could have comorbidities such as **alcohol abuse and anxiety**. It also differentially diagnoses with **depression and anxiety disorder**.

In the above graph, the **red area** shows the percentage of each comorbidity from your patient's EEG markers. Observe that each comorbidity marker is not unique and can be shared with other comorbidities.

Side circles in the above graph represent the differential diagnosis between depression and its misdiagnosis conditions based on your patient's EEG markers and trained artificial intelligence. The differential diagnosis probability is represented by **the bold blue bars** in the circles, and the probability of depression is represented by the **gray bars**.

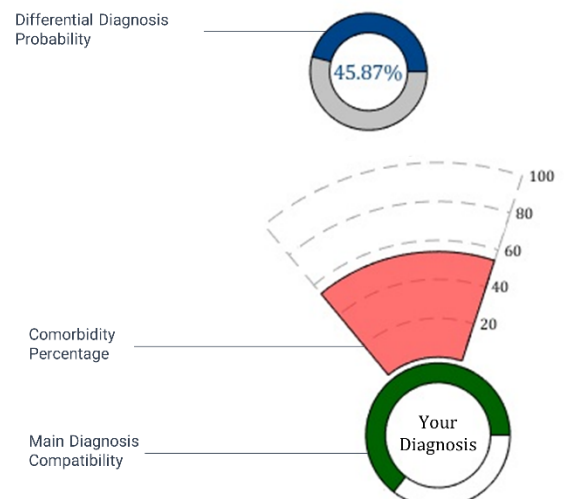
**Note:** In case your patient has drug abuse, obtain the substance abuse pathologic page of QEEGhome by registering the diagnosis under the initial diagnoses section of the website.

#### References:

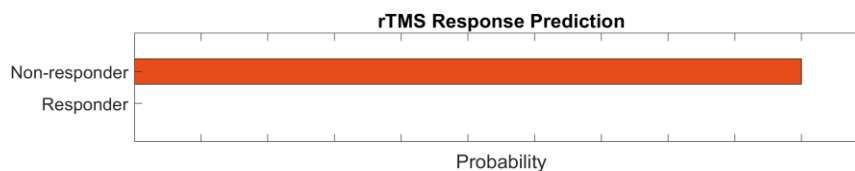
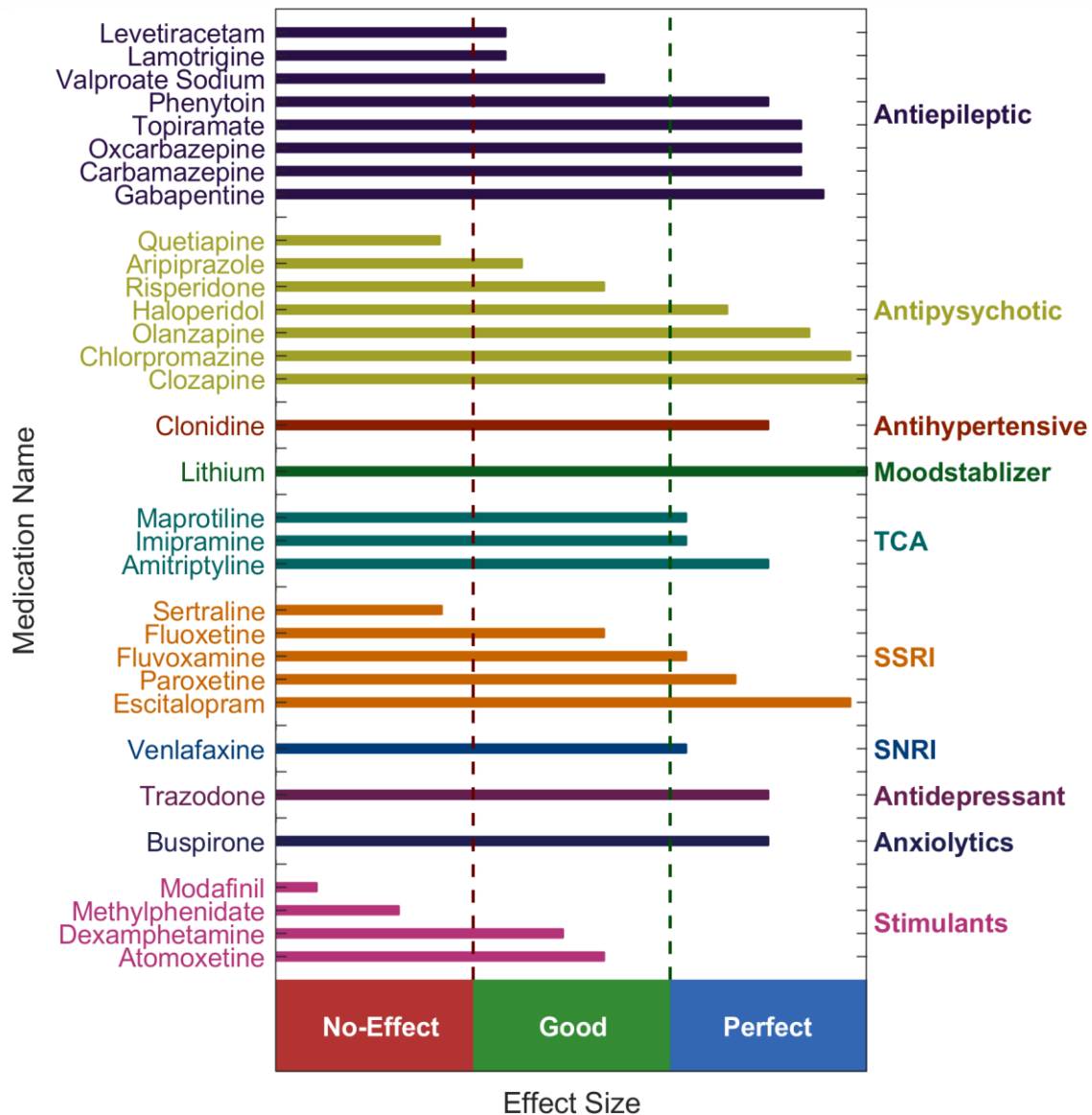
Sadock, B. J., Sadock, V. A., & Ruiz, P. (Eds.). (2025). Kaplan and Sadock's comprehensive textbook of psychiatry (11th ed., Vols. 1-2). Wolters Kluwer  
 Sadock, B. J., Sadock, V. A., & Ruiz, P. (2022). Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/clinical psychiatry (12th ed.). Wolters Kluwer

### User Manual

This section is only meant to explain the different parts of the pathologic chart and is not related to your patient's data.



## QEEG Based Predicting Medication Response



### Explanation

These two tables present the primary neuromarker findings from NPCindex Research Institute, derived from our research on medication-free Iranian cohorts.

The NPCindex team identified and validated 85 candidate features across raw bands, spectra, power, coherence, and LORETA, and report them here without sub-segregation to minimize complexity.

For context and methodology, see [qeehome.com](http://qeehome.com).

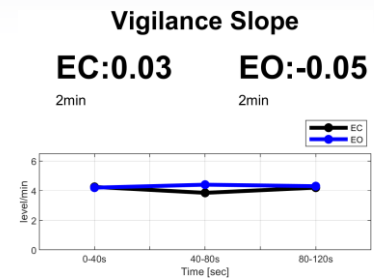
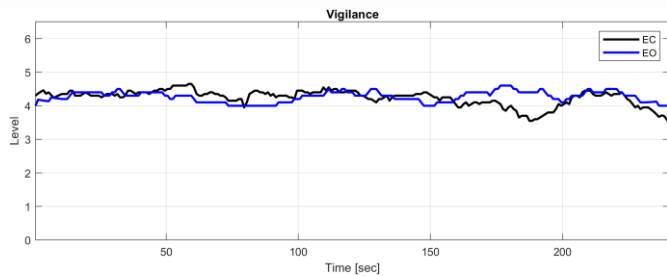
### Medication Recommendation

Use the medication charts in three quick steps:

- 1- Filter the medication groups by your working diagnosis.
- 2- Within each group, re-filter by your clinical assessment and the patient's specifics (comorbidities, contraindications, preferences).
- 3- From the remaining options, use the reported effect sizes to choose.

Based on papers, following this workflow has raised our response rates by ~20-30%.

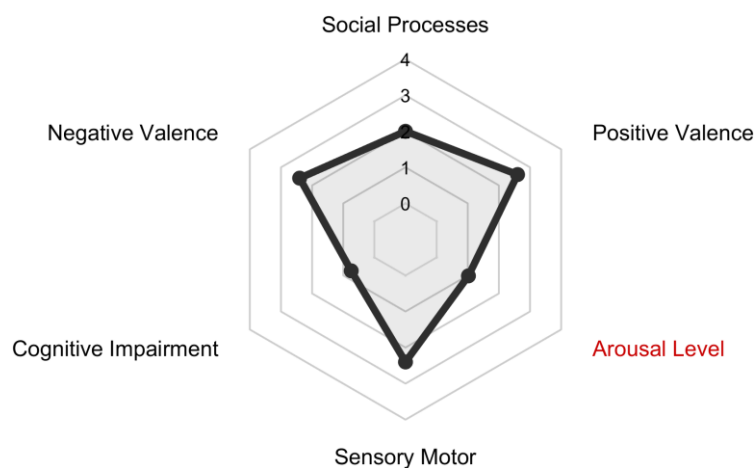
## Vigilance



## EEG Neuromarker Values

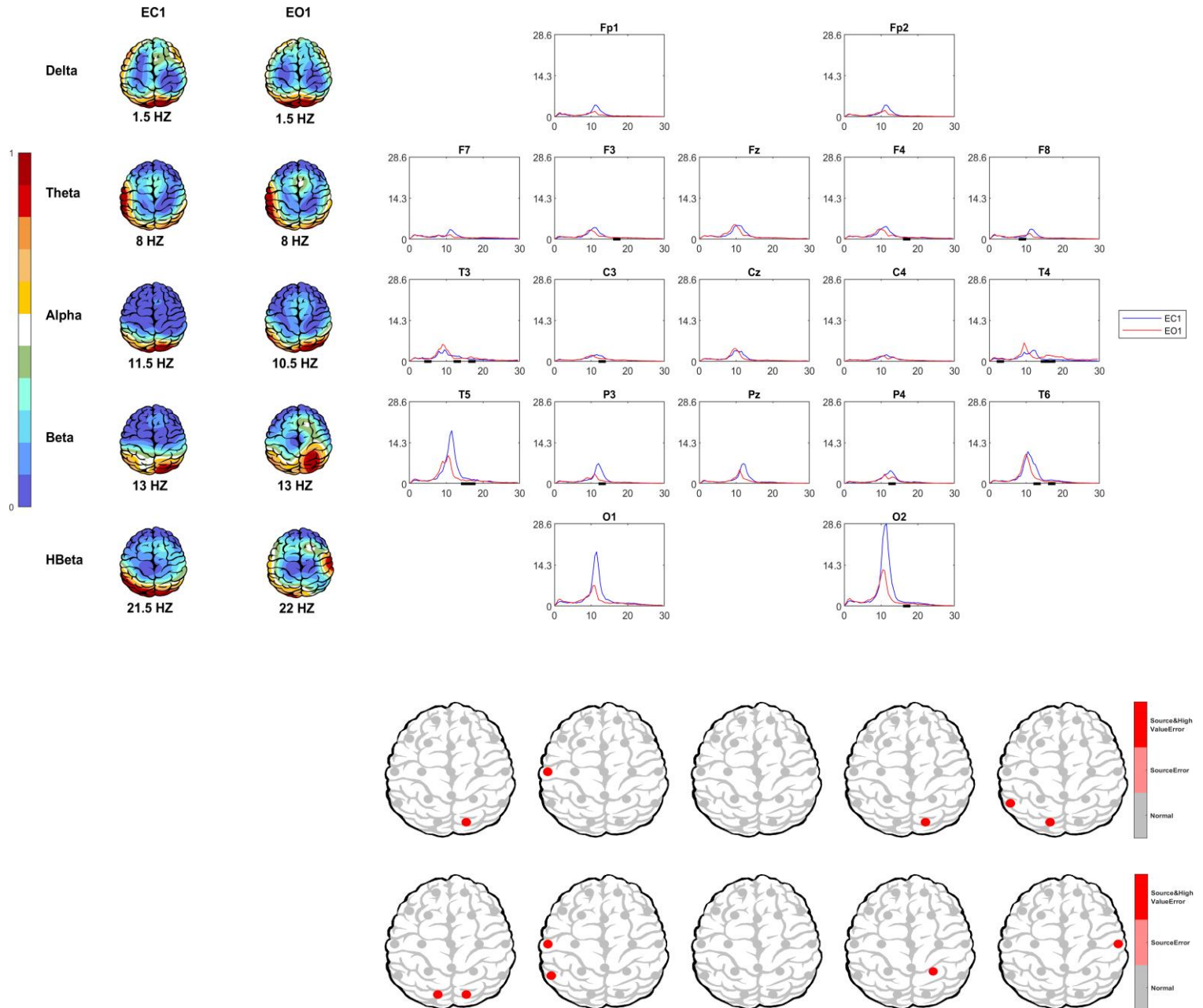
| Neuromarker                 | Region    | Value | Assessment |
|-----------------------------|-----------|-------|------------|
| APF - EO                    | Frontal   | 10.33 | High       |
| APF - EC                    | Frontal   | 11.25 | High       |
| APF - EO                    | Occipital | 10.62 | Normal     |
| APF - EC                    | Occipital | 11.62 | High       |
| Alpha Asymmetry             | Frontal   | -0.05 | Anhedonia  |
| Alpha Asymmetry             | Occipital | -0.26 | Anhedonia  |
| Beta Asymmetry              | Frontal   | -0.04 | Anxiety    |
| Alpha Blocking Error        | -         | -     | Not        |
| Vigilance Level - EO        | -         | 04.00 | Normal     |
| Vigilance Level - EC        | -         | 04.00 | Normal     |
| Vigilance Mean - EO         | -         | 04.27 | Low        |
| Vigilance Mean - EC         | -         | 04.23 | Normal     |
| Vigilance Regulation - EO   | -         | -0.05 | Normal     |
| Vigilance Regulation - EC   | -         | 00.03 | Normal     |
| Vigilance 0 Stage (%) - EO  | -         | 13.28 | Normal     |
| Vigilance 0 Stage (%) - EC  | -         | 00.00 | Normal     |
| Vigilance A1 Stage (%) - EO | -         | 00.00 | -          |
| Vigilance A1 Stage (%) - EC | -         | 49.38 | -          |

## RDoC Domain



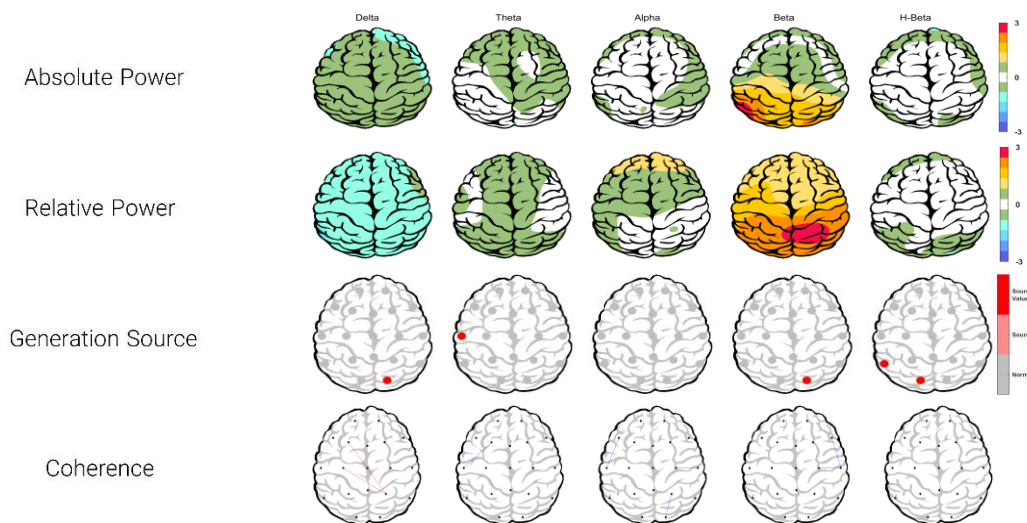


## EEG Spectra

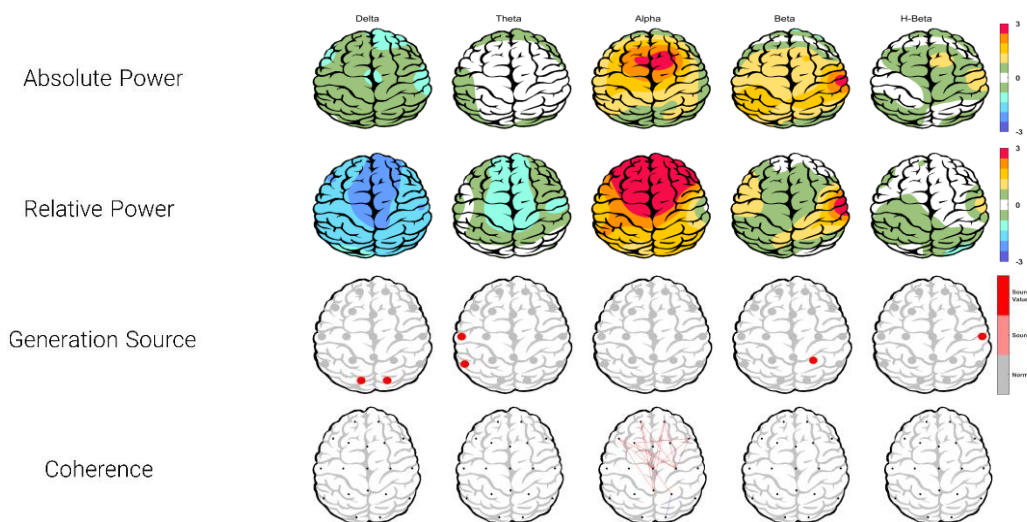


## Z Score Summary Information

■ Eye Close

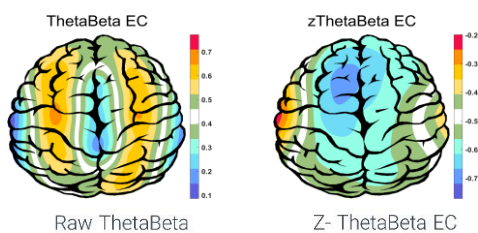


■ Eye Open



## Theta/Beta Ratio

■ Eye Close



■ Eye Open

